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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Dwayne First name A. Middle name Adams Last name and Suffix (Sr., Jr., II, III)	Rhonda First name K. Middle name Adams Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		FKA Rhonda Kramer
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-1889	xxx-xx-3814

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Debtor 1 **Dwayne A. Adams**Debtor 2 **Rhonda K. Adams**

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	■ I have not used any business name or EINs. Business name(s) EINs		
5.	Where you live	9862 North 2nd Street Roscoe, IL 61073	If Debtor 2 lives at a different address:		
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Winnebago			
		County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)		

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	otor 1 otor 2	Dwayne A. Adams Rhonda K. Adams					Case number (if known)	
Par	t 2:	Tell the Court About	∕our Bar	nkruptcy Ca	ase			
7. The chapter of the Bankruptcy Code you are choosing to file under						of each, see <i>Notice Required</i> page 1 and check the appropri	by 11 U.S.C. § 342(b) for Individuals Friate box.	iling for Bankruptcy
	choc	sing to file under	■ Cha	pter 7				
			☐ Cha	pter 11				
			☐ Cha	pter 12				
			☐ Cha	pter 13				
8.	How	you will pay the fee	_ a	bout how yourder. If your pre-printed need to pa	ou may pay. Typ attorney is subr address. y the fee in inst	ically, if you are paying the fee mitting your payment on your b	neck with the clerk's office in your local yourself, you may pay with cash, cash ehalf, your attorney may pay with a creption, sign and attach the Application for	nier's check, or money edit card or check with
			□ I b	request that tut is not rec pplies to yo	at my fee be wa quired to, waive y ur family size an	lived (You may request this op your fee, and may do so only if ad you are unable to pay the fe	tion only if you are filing for Chapter 7. your income is less than 150% of the e in installments). If you choose this op fficial Form 103B) and file it with your	official poverty line that otion, you must fill out
9.		you filed for	■ No.					
		ruptcy within the 8 years?	☐ Yes.					
				District		When	Case number	
				District		When	Case number	
				District		When	Case number	
10.	case filed not f you,	any bankruptcy s pending or being by a spouse who is iling this case with or by a business ner, or by an ate?	■ No					
				Debtor			Relationship to you	
				District		When	Case number, if know	n
				Debtor			Relationship to you	
				District		When	Case number, if know	າ
11.		ou rent your lence?	■ No.	Go to	line 12.			
	16210	iciloc :	☐ Yes.	Has yo	our landlord obta	nined an eviction judgment aga	inst you and do you want to stay in you	ur residence?
					No. Go to line	12.		
					Yes. Fill out <i>Ini</i> bankruptcy pet		on Judgment Against You (Form 101A)	and file it with this

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	otor 1		Dodam	Case number (if known)	
Par	t 3: Report About Any Bu	ısinesses	You Own as a Sole Proprie	tor	
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.		
		☐ Yes.	Name and location of bus	siness	
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any		
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, Sta	te & ZIP Code	
	it to this petition.		Check the appropriate bo	ox to describe your business:	
			☐ Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))	
			☐ Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))	
			☐ Stockbroker (as d	lefined in 11 U.S.C. § 101(53A))	
			☐ Commodity Broke	er (as defined in 11 U.S.C. § 101(6))	
			■ None of the above	e	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	rou are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate adlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of erations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure 11 U.S.C. 1116(1)(B).		
	For a definition of small	■ No.	I am not filing under Chap	oter 11.	
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter Code.	11, but I am NOT a small business debtor according to the definition in the Bankruptcy	
		☐ Yes.	I am filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.	
Par	t 4: Report if You Own or	Have Any	Hazardous Property or An	y Property That Needs Immediate Attention	
14.	Do you own or have any	■ No.			
	property that poses or is alleged to pose a threat of imminent and	☐ Yes.	What is the hazard?		
	identifiable hazard to public health or safety? Or do you own any property that needs		If immediate attention is		
	immediate attention?		needed, why is it needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?		
				Number, Street, City, State & Zip Code	

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	Dwayne A. Adams	
Debtor 2	Rhonda K. Adams	Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

□ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 17-81975 Doc 1 Filed 08/22/17 Entered 08/22/17 16:45:17 Desc Main Document Page 6 of 54

	otor 2 Rhonda K. Adams			Case	e number (if known)	
Par	t 6: Answer These Questi	ons for Re	eporting Purposes			
16.	What kind of debts do you have?		Are your debts primarily consumindividual primarily for a personal			01(8) as "incurred by an
			☐ No. Go to line 16b.			
			Yes. Go to line 17.			
		16b.	Are your debts primarily busine money for a business or investmen			
			☐ No. Go to line 16c.			
			☐ Yes. Go to line 17.			
		16c.	State the type of debts you owe to	hat are not consumer debts or	business debts	
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. G	Go to line 18.		
Do you estimate that after any exempt property is excluded an administrative expense		■ Yes.	I am filing under Chapter 7. Do yo are paid that funds will be availab			administrative expenses
	are paid that funds will be available for distribution to unsecured creditors?		■ No □ Yes			
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-19 □ 200-99	•	☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000	☐ 25,001-50, ☐ 50,001-100 ☐ More than	0,000
19.	How much do you estimate your assets to be worth?	\$100,0	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 millio □ \$50,000,001 - \$100 millio □ \$100,000,001 - \$500 mill	on	0,001 - \$10 billion 00,001 - \$50 billion
20.	How much do you estimate your liabilities to be?	\$100,0	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 millio □ \$50,000,001 - \$100 millio □ \$100,000,001 - \$500 mill	on	001 - \$1 billion 0,001 - \$10 billion 00,001 - \$50 billion \$50 billion
Par	t 7: Sign Below					
For	you	I have exa	amined this petition, and I declare	under penalty of perjury that th	he information provided is tr	ue and correct.
			chosen to file under Chapter 7, I are ates Code. I understand the relief			
			ney represents me and I did not p t, I have obtained and read the no			me fill out this
		I request r	relief in accordance with the chapt	ter of title 11, United States Co	ode, specified in this petition.	
		bankrupto and 3571.		250,000, or imprisonment for up	p to 20 years, or both. 18 U.	
		Dwayne	ne A. Adams A. Adams of Debtor 1	/s/ Rhond Rhonda K Signature o		
		Executed	on August 22, 2017 MM / DD / YYYY	Executed o		

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Debtor 1	Dwayne A. Adams	Document	Page 7 of 54		
Debtor 2	Rhonda K. Adams			Case number (if known)	
	attorney, if you are ed by one	I, the attorney for the debtor(s) named in this under Chapter 7, 11, 12, or 13 of title 11, Unit for which the person is eligible. I also certify	ed States Code, and have	ve explained the relief a	available under each chapter
•	not represented by ey, you do not need a page.	and, in a case in which § 707(b)(4)(D) applies schedules filed with the petition is incorrect.			
		/s/ Daniel A. Springer	Date	August 22, 20	
		Signature of Attorney for Debtor		MM / DD / YYYY	
		Daniel A. Springer			
		Printed name			
		Springer Law Firm			
		2222 E State St			
		Suite 107			
		Rockford, IL 61104			
		Number, Street, City, State & ZIP Code			

Email address

Contact phone **815.312.4725**

6314059Bar number & State

dspringerlaw@gmail.com

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		DOGUIII	eni Paue o ul 54	
Fill in this infor	mation to identify your	case:		
Debtor 1	Dwayne A. Adam	s		
	First Name	Middle Name	Last Name	
Debtor 2	Rhonda K. Adam	s		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)		_		☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	102,380.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	38,962.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	141,342.00
Paı	t 2: Summarize Your Liabilities		
			i abilities It you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	174,794.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	91,947.00
	Your total liabilities	\$	266,741.00
Paı	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,596.58
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,592.79
Paı	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sc	hedules.
7.	■ Yes What kind of debt do you have?		
	Vour debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for:		famili, an

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

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Debtor 1	Dwayne A. Adams	_ coamon ago con co	
	Rhonda K. Adams	Case number (if known)	

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

4,234.59

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	45,540.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	45,540.00

	Ca	Se 17-8197;	9 DOC 1	_	08/22/1 <i>1</i> ument	Page 10 of 54	17 10.45	.17 Des	SC IV	iaiii
Fill	in this inforn	nation to identify	your case and th			1 800 10 01 34				
Deb	otor 1	Dwayne A. A	Adams							
		First Name		e Name		Last Name				
	otor 2	Rhonda K. A								
(Spo	use, if filing)	First Name	Middle	e Name		Last Name				
Uni	ted States Bar	nkruptcy Court for	the: NORTHER	RN DIST	RICT OF ILLI	NOIS				
Cas	se number _					_				Check if this is an amended filing
Sc In ea think	chedule ch category, se cit fits best. Be	e as complete and a space is needed,	roperty escribe items. List	le. If two	married people	an asset fits in more than one e are filing together, both are e top of any additional pages	equally resp	onsible for su	pplyin	g correct
Part	11: Describe I	Each Residence, B	uilding, Land, or Ot	ther Real	Estate You Ov	vn or Have an Interest In				
_	I No. Go to Part I Yes. Where is									
1.1	0062 North	n 2nd Street		What	is the property	y? Check all that apply				
		f available, or other des	scription		Single-family I Duplex or mul Condominium		the amount	t of any secured	d claim	exemptions. Put is on Schedule D: ured by Property.
	Roscoe	IL	61073-0000		Land	or mobile home	Current va	perty?		rent value of the ion you own?
	City	State	ZIP Code		Investment pr	operty	\$10	01,880.00		\$101,880.00
				U Who	Timeshare Other has an interest	t in the property? Check one	(such as fo			vnership interest by the entireties, or
							Joint ter	nant		
	Winnebag	0			Debtor 2 only					
	County				Debtor 1 and	Debtor 2 only	<u>.</u>			
					At least one of	f the debtors and another		k if this is com structions)	munit	y property
						ou wish to add about this ite	m, such as lo	ocal		

Official Form 106A/B Schedule A/B: Property page 1

Case 17-81975 Doc 1 Filed 08/22/17 Entered 08/22/17 16:45:17 Desc Main Document Page 11 of 54 Debtor 1 Dwayne A. Adams Debtor 2 Rhonda K. Adams Case number (if known) If you own or have more than one, list here: 1.2 What is the property? Check all that apply **Sunset Funeral Home and Memorial** ☐ Single-family home Do not deduct secured claims or exemptions. Put **Gardens** the amount of any secured claims on Schedule D: Duplex or multi-unit building Creditors Who Have Claims Secured by Property. 8800 North Alpine Road Condominium or cooperative Street address, if available, or other description Manufactured or mobile home Current value of the Current value of the **Machesney Park** IL 61115-0000 Land П entire property? portion you own? City \$500.00 \$500.00 State ZIP Code Investment property Timeshare Describe the nature of your ownership interest **Cemetery Plot** Other (such as fee simple, tenancy by the entireties, or a life estate), if known. Who has an interest in the property? Check one Fee simple ☐ Debtor 1 only Winnebago ☐ Debtor 2 only County Debtor 1 and Debtor 2 only Check if this is community property At least one of the debtors and another (see instructions) Other information you wish to add about this item, such as local property identification number: 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for \$102,380.00 pages you have attached for Part 1. Write that number here......>> Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles □ No Yes Do not deduct secured claims or exemptions. Put **GMC** Who has an interest in the property? Check one Make: the amount of any secured claims on Schedule D: Envoy Creditors Who Have Claims Secured by Property. Debtor 1 only Model: 2008 Debtor 2 only Current value of the Current value of the 105,000 Approximate mileage: entire property? portion you own? Debtor 1 and Debtor 2 only

3 1 Other information: ☐ At least one of the debtors and another \$6,125.00 \$6,125.00 ☐ Check if this is community property (see instructions) Do not deduct secured claims or exemptions. Put **GMC** 3.2 Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: Sierra Debtor 1 only Creditors Who Have Claims Secured by Property. Model: 2003 Year: Debtor 2 only Current value of the Current value of the 114.000 Approximate mileage: entire property? portion you own? Debtor 1 and Debtor 2 only Other information: At least one of the debtors and another \$4,875.00 \$4,875.00 ☐ Check if this is community property (see instructions)

Official Form 106A/B Schedule A/B: Property page 2

	Case 17-8	31975	Doc 1	Filed 08/22/17 Document	Entered 08/22/17 16:4 Page 12 of 54	5:17 Desc Main
Debtor 1 Debtor 2	Dwayne A. A Rhonda K. A			Document	Case number	(if known)
					cles, other vehicles, and accessorion ownobiles, motorcycle accessories	
■ No						
☐ Yes						
					om Part 2, including any entries fo	
Part 3: De	escribe Your Perso	nal and Ho	usehold Items	s		
Do you o	wn or have any le	egal or eq	uitable intere	est in any of the follow	ing items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	hold goods and follows: Major applian			nina, kitchenware		
□ No	, , , ,	,	, ,	•		
■ Yes	. Describe					
		Househ	old Furnitu	ıre		\$675.00
□ No	oles: Televisions a			stereo, and digital equip ia players, games	oment; computers, printers, scanners	; music collections; electronic devices
		4 TV's,	3 Laptop C	omputers, Surround	I Sound System	\$325.00
	ibles of value bles: Antiques and other collection				oks, pictures, or other art objects; sta	mp, coin, or baseball card collections;
_	. Describe					
		Books,	Pictures, H	Iome Decor		\$30.00
Examp □ No	nent for sports ar oles: Sports, photo musical instru	graphic, ex		other hobby equipment;	picycles, pool tables, golf clubs, skis;	; canoes and kayaks; carpentry tools;
		Golf Clu	ub Set, Can	nera		\$70.00
		Misc. S	porting Go	ods		\$200.00
■ No □ Yes.	nples: Pistols, rifles	s, shotguns	s, ammunition	i, and related equipment		

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Dwayne A. Adams

Debtor 1 Debtor 2	Dwayne A. A Rhonda K. A				Case number (if known)	
		Used (Clothing			\$900.00
☐ No	<i>mples:</i> Everyday je		tume jewelry, enga ng Ring Set	gement rings, wedding rings, heirlo	om jewelry, watches, gems,	gold, silver \$200.00
<i>Exan</i> □ No	farm animals mples: Dogs, cats, I					
		2 Dogs	3			\$0.00
■ No	other personal and		-	not already list, including any he	ealth aids you did not list	
				Part 3, including any entries for pa	ages you have attached	\$2,400.00
	Describe Your Finand Down or have any le			any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
☐ No	mples: Money you h	-	our wallet, in your ho	ome, in a safe deposit box, and on h	nand when you file your petiti	ion
					Cash	\$62.00
Exan	institutions.			ounts; certificates of deposit; shares s with the same institution, list each. Institution name:		houses, and other similar
		17.1.	Checking	Chase Bank		\$475.00
		17.2.	Checking	Rock Valley Federal Cr	edit Union	\$25.00
	ls, mutual funds, o <i>mples:</i> Bond funds,			okerage firms, money market accou	unts	
■ No □ Yes	3		Institution or issuer	name:		
	venture	ock and i	nterests in incorp	orated and unincorporated busin	esses, including an interes	st in an LLC, partnership, and

Official Form 106A/B Schedule A/B: Property page 4

	Case	17-81975	DOC 1	Document	Page 14	of 54	/ Desc Main
Debtor		A. Adams		Document	raye 14		,
Debtor	2 Rhonda	K. Adams				Case number (if kno	wn)
ПΥ	es. Give speci	fic information a Nam	about them ne of entity:			% of ownership:	
Ne No ■ N	egotiable instrun on-negotiable in No	nents include pe struments are the ic information a	ersonal check nose you canı	negotiable and non- s, cashiers' checks, p not transfer to someor	romissory notes,	, and money orders.	
Ex	<i>amples:</i> Interes lo		A, Keogh, 40°	1(k), 403(b), thrift savi	ngs accounts, or	other pension or profit-shar	ing plans
■ Y	es. List each a	ccount separate Type o	ely. f account:	Institution	n name:		
		403(b))	Current	Employer		\$25,000.00
Yo Ex ■ N	our share of all u camples: Agreer	ments with landl	you have ma	rent, public utilities (e		or use from a company er), telecommunications com dual:	npanies, or others
23. An ı	nuities (A contr	ract for a period	ic payment of	money to you, either	for life or for a nu	umber of years)	
	•	·	and descript			amber of years)	
26 U ■ N	J.S.C. §§ 530(b lo)(1), 529A(b), a	nd 529(b)(1).			ler a qualified state tuition any interests.11 U.S.C. § 52	
25. Tru	lo	or future intere	ests in prope				exercisable for your benefit
26. Pat <i>Ex</i>	t ents, copyrigh <i>amples:</i> Interne		s, trade secre s, websites, p	ets, and other intelled roceeds from royalties		greements	
Ex ■ N	<i>ramples:</i> Buildin lo		usive licenses		ion holdings, liqu	uor licenses, professional lic	enses
	·	fic information a	about them				
Money	or property o	wed to you?					Current value of the portion you own? Do not deduct secured claims or exemptions.
	-	•	bout them, inc	cluding whether you a	lready filed the re	eturns and the tax years	
	mily support camples: Past do	ue or lump sum	alimony, spo	usal support, child sup	oport, maintenan	ce, divorce settlement, prop	erty settlement

Official Form 106A/B Schedule A/B: Property page 5

 \square Yes. Give specific information.....

	Case 17-81975	Document	Page 15 of 54	Desc Main
Debtor 1 Debtor 2	Dwayne A. Adams Rhonda K. Adams	Boodinent	Case number (if known)	
	amounts someone owes you		fits, sick pay, vacation pay, workers' comper	sation, Social Security
	Give specific information			
<i>Exam</i> _l □ No	•	insurance; health savings account (H	ISA); credit, homeowner's, or renter's insuran	ce
_ 100.		any name:	Beneficiary:	Surrender or refund value:
	Curre	ent Employer Term Life		\$0.00
33. Claims	ples: Accidents, employment Describe each claim contingent and unliquidated	ther or not you have filed a lawsuit disputes, insurance claims, or rights d claims of every nature, including		set off claims
Yes.	Describe each claim			
		Potential Social Security Di	sability Claim	Unknown
■ No □ Yes.			y entries for pages you have attached	\$25,562.00
Part 5: De	escribe Any Business-Related F	Property You Own or Have an Interest In	n. List any real estate in Part 1.	
No. Go	own or have any legal or equita o to Part 6. Go to line 38.	able interest in any business-related pro	operty?	
	escribe Any Farm- and Commer you own or have an interest in far	cial Fishing-Related Property You Own mland, list it in Part 1.	or Have an Interest In.	
■ No.	u own or have any legal or 6 . Go to Part 7. s. Go to line 47.	equitable interest in any farm- or co	ommercial fishing-related property?	

Official Form 106A/B Schedule A/B: Property page 6

Describe All Property You Own or Have an Interest in That You Did Not List Above

Part 7:

Case 17-81975 Doc 1 Filed 08/22/17 Entered 08/22/17 16:45:17 Desc Main Debtor 1 Debtor 2 Dwayne A. Adams

Poebtor 2 Dwayne A. Adams

Rhonda K. Adams

Case number (if known)

DCL	Militar N. Adams		Case Humber (# known)	
•	Do you have other property of any kind you did not already list Examples: Season tickets, country club membership No Yes. Give specific information	?		
54.	Add the dollar value of all of your entries from Part 7. Write th	at number here		\$0.00
Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$102,380.00
56.	Part 2: Total vehicles, line 5	\$11,000.00		
57.	Part 3: Total personal and household items, line 15	\$2,400.00		
58.	Part 4: Total financial assets, line 36	\$25,562.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$38,962.00	Copy personal property total	\$38,962.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$141,342.00

Official Form 106A/B Schedule A/B: Property page 7

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			III FAUE 17 UI 34		
Fill in this infor	mation to identify your	case:			
Debtor 1	Dwayne A. Adam	s			
	First Name	Middle Name	Last Name		
Debtor 2	Rhonda K. Adam	s			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B*: *Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2*: *Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
\$101,880.00		\$30,000.00	735 ILCS 5/12-901
		100% of fair market value, up to any applicable statutory limit	
\$6,125.00		\$4,800.00	735 ILCS 5/12-1001(c)
		100% of fair market value, up to any applicable statutory limit	
\$6,125.00		\$1,325.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$4,875.00		\$4,875.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$675.00		\$675.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
	\$6,125.00 \$4,875.00	\$6,125.00 \$44,875.00	Check only one box for each exemption. Schedule A/B \$101,880.00 \$30,000.00 100% of fair market value, up to any applicable statutory limit \$6,125.00 \$1,325.00 \$1,325.00 \$1,325.00 \$1,00% of fair market value, up to any applicable statutory limit \$4,875.00 \$4,875.00 \$100% of fair market value, up to any applicable statutory limit \$4,875.00 \$4,875.00 \$675.00 \$675.00 \$100% of fair market value, up to any applicable statutory limit

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Dwayne A. Adams Debtor 1 Rhonda K. Adams Debtor 2 Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B 4 TV's, 3 Laptop Computers, 735 ILCS 5/12-1001(b) \$325.00 \$325.00 **Surround Sound System** Line from Schedule A/B: 7.1 100% of fair market value, up to any applicable statutory limit **Books, Pictures, Home Decor** 735 ILCS 5/12-1001(b) \$30.00 \$30.00 Line from Schedule A/B: 8.1 100% of fair market value, up to any applicable statutory limit Golf Club Set, Camera 735 ILCS 5/12-1001(b) \$70.00 \$70.00 Line from Schedule A/B: 9.1 100% of fair market value, up to any applicable statutory limit **Misc. Sporting Goods** 735 ILCS 5/12-1001(b) \$200.00 \$200.00 Line from Schedule A/B: 9.2 100% of fair market value, up to any applicable statutory limit **Used Clothing** 735 ILCS 5/12-1001(a) \$900.00 \$900.00 Line from Schedule A/B: 11.1 100% of fair market value, up to any applicable statutory limit **Wedding Ring Set** 735 ILCS 5/12-1001(b) \$200.00 \$200.00 Line from Schedule A/B: 12.1 100% of fair market value, up to any applicable statutory limit Cash 735 ILCS 5/12-1001(b) \$62.00 \$62.00 Line from Schedule A/B: 16.1 100% of fair market value, up to any applicable statutory limit Checking: Chase Bank 735 ILCS 5/12-1001(b) \$475.00 \$213.00 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit **Checking: Rock Valley Federal Credit** 735 ILCS 5/12-1001(b) \$25.00 \$25.00 Union Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit 403(b): Current Employer 735 ILCS 5/12-1006 \$25,000.00 Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit **Potential Social Security Disability** 735 ILCS 5/12-1001(g)(1) Unknown 100%

Claim

Line from Schedule A/B: 34.1

100% of fair market value, up to any applicable statutory limit

Filed 08/22/17 Entered 08/22/17 16:45:17 Desc Main Page 19 of 54 Document Dwayne A. Adams Debtor 1 Rhonda K. Adams Case number (if known) Debtor 2 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Case 17-81975

Yes

Doc 1

Case 17-81975 Doc 1 Filed 08/22/17 Entered 08/22/17 16:45:17 Desc Main

		Document	Page 2	0 of 54	_	
Fill in this information to i	dentify your	r case:				
Debtor 1 Dwayr First Nam	ne A. Adan	NS Middle Name	Last Name			
	da K. Adam	ns				
(Spouse if, filing) First Name	е	Middle Name	Last Name			
United States Bankruptcy C	ourt for the:	NORTHERN DISTRICT OF IL	LINOIS			
Case number						
(if known)					☐ Check	if this is an
					amend	ed filing
Official Form 106D						
	oditors	Who Have Claims	Socure	d by Proporty	,	40/45
Scriedule D. Cre	euitoi S	WIIO Have Claims	Secure	d by Property		12/15
		two married people are filing toget ut, number the entries, and attach i				
1. Do any creditors have claim	s secured by	your property?				
☐ No. Check this box a	nd submit th	is form to the court with your othe	er schedules.	You have nothing else to	report on this form.	
Yes. Fill in all of the i	nformation b	pelow.				
Part 1: List All Secured	Claims					
		nore than one secured claim, list the cr			Column B	Column C
		a particular claim, list the other creditor al order according to the creditor's nar		Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
	•	-		value of collateral. \$158,986.00	claim \$101 990 00	if any \$57,106.00
2.1 Dubuque Bank Creditor's Name		9862 North 2nd Street Rose		<u> </u>	\$101,880.00	\$37,100.00
		61073 Winnebago County	JOO, 12			
PO Pov 260	l	As of the date you file, the claim is	: Check all that			
PO Box 360 Dubuque, IA 52004	ı	apply. Contingent				
Number, Street, City, State &		☐ Unliquidated				
		Disputed				
Who owes the debt? Check	one.	Nature of lien. Check all that apply.				
☐ Debtor 1 only ☐ Debtor 2 only		An agreement you made (such as car loan)	s mortgage or s	ecured		
■ Debtor 1 and Debtor 2 only		☐ Statutory lien (such as tax lien, m	echanic's lien)			
☐ At least one of the debtors a	and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates community debt	to a	Other (including a right to offset)				
Date debt was incurred 12/	17/2012	Last 4 digits of account nun	nber			
Rock Valley Federa	al					
Credit Union		Describe the property that secures	the claim:	\$15,808.00	\$101,880.00	\$15,808.00
Creditor's Name		9862 North 2nd Street Rose	coe, IL			
Attn: Bankruptcy [Dent.	61073 Winnebago County				
1201 Clifford Ave.	op	As of the date you file, the claim is apply.	: Check all that			
Loves Park, IL 611	11	Contingent				
Number, Street, City, State &	Zip Code	☐ Unliquidated				
Who owes the debt? Check	one.	Disputed Nature of lien. Check all that apply.	-			
Debtor 1 only		An agreement you made (such as		ecured		
☐ Debtor 2 only		car loan)	· ······ga·ga· ··· ·			
Debtor 1 and Debtor 2 only		☐ Statutory lien (such as tax lien, m	echanic's lien)			
At least one of the debtors a		Judgment lien from a lawsuit				
☐ Check if this claim relates community debt	то а	Other (including a right to offset)				
Date debt was incurred 6/3	/2009	Last A digite of account	mhar			
Date debt was incurred 6/3	12000	Last 4 digits of account nur	IIDEI			

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Debtor 1	Dwayne A. Adams			Case number (if know)	
	First Name	Middle Name	Last Name		
Debtor 2	Rhonda K. Ad	lams			
	First Name	Middle Name	Last Name		
					_
Add the	dollar value of you	r entries in Column A on	this page. Write that number here:	\$174,794.0	00
	the last page of yo	ur form, add the dollar va	lue totals from all pages.	\$174,794.0	00

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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	000017 01070 0001	Document Page 22 of 54	Desc Main
Fill in th	is information to identify your case:		
Debtor 1	Dwayne A. Adams		
200101		dle Name Last Name	
Debtor 2	Rhonda K. Adams		
(Spouse if,	filing) First Name Mic	dle Name Last Name	
United S	tates Bankruptcy Court for the: NORTH	ERN DISTRICT OF ILLINOIS	
Case nu	mber		☐ Check if this is an
			amended filing
	ll Form 106E/F Iule E/F: Creditors Who Ha	ve Unsecured Claims	12/15
any execu Schedule Schedule left. Attacl name and	tory contracts or unexpired leases that could G: Executory Contracts and Unexpired Lease D: Creditors Who Have Claims Secured by Pr h the Continuation Page to this page. If you h case number (if known).	r creditors with PRIORITY claims and Part 2 for creditors with NONPRIC result in a claim. Also list executory contracts on Schedule A/B: Prope s (Official Form 106G). Do not include any creditors with partially secur operty. If more space is needed, copy the Part you need, fill it out, numbave no information to report in a Part, do not file that Part. On the top of	orty (Official Form 106A/B) and on ed claims that are listed in our the entries in the boxes on the
Part 1:	List All of Your PRIORITY Unsecured		
_	ny creditors have priority unsecured claims a	gainst you?	
	o. Go to Part 2.		
□ Ye			
Part 2:	List All of Your NONPRIORITY Unsect		
3. Do ar	ny creditors have nonpriority unsecured clain	ns against you?	
□ No	o. You have nothing to report in this part. Submit	this form to the court with your other schedules.	
■ Ye	es.		
unsed	cured claim, list the creditor separately for each cone creditor holds a particular claim, list the othe	e alphabetical order of the creditor who holds each claim. If a creditor has claim. For each claim listed, identify what type of claim it is. Do not list claims a creditors in Part 3.If you have more than three nonpriority unsecured claims	already included in Part 1. If more
			Total claim
	Bank of America	Last 4 digits of account number	\$498.00
ı	Nonpriority Creditor's Name Attn: Bankruptcy Dept. PO Box 982238	When was the debt incurred?	
1	El Paso, TX 79998 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
١	Who incurred the debt? Check one.		
ı	Debtor 1 only	☐ Contingent	
I	Debtor 2 only	☐ Unliquidated	
I	Debtor 1 and Debtor 2 only	☐ Disputed	
I	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that yo report as priority claims	u did not
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
		Other. Specify Credit Card Purchases	
I.	☐ Yes	Other, Specify Credit Card Purchases	

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	Dwayne A. Adams Rhonda K. Adams	Case number (if know)	
4.2	Capital One Bank USA NA	Last 4 digits of account number	\$3,635.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. PO Box 30281	When was the debt incurred?	+0,000.00
-	Salt Lake City, UT 84130 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit Card Purchases	
4.3	Capital One Bank USA NA Nonpriority Creditor's Name	Last 4 digits of account number	\$2,471.00
	Attn: Bankruptcy Dept. PO Box 30281	When was the debt incurred?	
-	Salt Lake City, UT 84130 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit Card Purchases	
4.4	Capital One Bank USA NA Nonpriority Creditor's Name	Last 4 digits of account number	\$3,452.00
	Attn: Bankruptcy Dept. PO Box 30281	When was the debt incurred?	
-	Salt Lake City, UT 84130 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	,	
	☐ Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit Card Purchases	

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	Dwayne A. Adams Rhonda K. Adams	Case number (if know)	
4.5	Capital One Bank USA NA	Last 4 digits of account number	\$4,952.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. PO Box 30281	When was the debt incurred?	Ų 1,00 2 .00
	Salt Lake City, UT 84130 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent ☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No □ Yes	□ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card Purchases	
4.6	Capital One/Menards Nonpriority Creditor's Name	Last 4 digits of account number	\$3,449.00
	PO Box 30253 Salt Lake City, UT 84130-0253	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card Purchases	
	Chase Bank USA Nonpriority Creditor's Name	Last 4 digits of account number	\$4,823.00
	Attn: Bankruptcy Dept. PO Box 15298	When was the debt incurred?	
-	Wilmington, DE 19850 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card Purchases	

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Debto	Rhonda K. Adams	Case number (if know)	
4.8	Citicards CBNA	Last 4 digits of account number	\$2,527.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. PO Box 6241	When was the debt incurred?	
	Sioux Falls, SD 57117 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card Purchases	
4.9	Citicards CBNA Nonpriority Creditor's Name	Last 4 digits of account number	\$2,522.00
	Attn: Bankruptcy Dept. PO Box 6241	When was the debt incurred?	
	Sioux Falls, SD 57117 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card Purchases	
4.1	Discover Financial Services		\$4.952.00
0	Nonpriority Creditor's Name	Last 4 digits of account number	φ4,932.00
	PO Box 15316 Wilmington, DE 19850	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card Purchases	

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	Dwayne A. Adams Rhonda K. Adams	Case number (if know)	
4.1	Nelnet Loan Services	Last 4 digits of account number	\$45,540.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept 3015 S Parker Rd Ste 425 Aurora, CO 80014	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
		Student Loans	
4.1	Rock Valley Federal Credit Union	Last 4 digits of account number	\$6,924.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept. 1201 Clifford Ave.	When was the debt incurred?	
	Loves Park, IL 61111 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Personal Loan	
4.1	SYNCB/Care Credit	Last 4 digits of account number	\$3,283.00
•	Nonpriority Creditor's Name Attn: Bankruptcy Dept PO BOX 960061	When was the debt incurred?	
	Orlando, FL 32896 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card Purchases	

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Debtor 1 Dwayne A. Adams Debtor 2 Rhonda K. Adams Case number (if know) 4.1 TD Bank USA/Target Credit \$2,919.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Dept. When was the debt incurred? PO Box 673 Minneapolis, MN 55440 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Credit Card Purchases ☐ Yes Other. Specify Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Equifax** Line 4.3 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 740256 Part 2: Creditors with Nonpriority Unsecured Claims Atlanta, GA 30374 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Experian Line 4.3 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 4500 Part 2: Creditors with Nonpriority Unsecured Claims Allen, TX 75013 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **TransUnion** Line 4.3 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 555 West Adams Street Part 2: Creditors with Nonpriority Unsecured Claims Chicago, IL 60661 Last 4 digits of account number Part 4: Add the Amounts for Each Type of Unsecured Claim 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total Claim Domestic support obligations** 6a 6a 0.00 Total claims Taxes and certain other debts you owe the government 6b. 0.00 from Part 1 6b. Claims for death or personal injury while you were intoxicated 6c. 0.00 6d Other. Add all other priority unsecured claims. Write that amount here. 6d. 0.00 Total Priority. Add lines 6a through 6d. 6e. 0.00 **Total Claim** 6f Student loans 6f. 45,540.00 Total claims from Part 2 6g. Obligations arising out of a separation agreement or divorce that 0.00 you did not report as priority claims 6q

Debts to pension or profit-sharing plans, and other similar debts

Other. Add all other nonpriority unsecured claims. Write that amount

6h.

6i.

6h.

6i

0.00

46.407.00

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Dwayne A. Adams Rhonda K. Adams	Case number (if know)	
here.		

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		Docume	ni Paue 29 oi 5	<u> </u>	
Fill in this infor	mation to identify your	case:			
Debtor 1	Dwayne A. Adam	s			
	First Name	Middle Name	Last Name		
Debtor 2	Rhonda K. Adam	S			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number (if known)				☐ Check if thi	s is an
				amended fi	ling

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	n whom you have the c	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	-
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.3	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			
	City		State	ZIP Code	_
	•				

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		Docume	ent Page 30 o	of 54
Fill in this i	nformation to identify your	case:		
Debtor 1	Dwayne A. Adams	S		
5	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing	Rhonda K. Adams	Middle Name	Last Name	
	,,			
United State	es Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case numb	er			
(if known)				☐ Check if this is an amended filing
				amended ming
Official	Form 106H			
Schedi	ule H: Your Cod	ebtors		12/15
your name a	d number the entries in the and case number (if known). ou have any codebtors? (if y	. Answer every question		o this page. On the top of any Additional Pages, write as a codebtor.
	()	,		
■ No □ Yes				
	in the last 8 years, have you , California, Idaho, Louisiana,			y? (Community property states and territories include ington, and Wisconsin.)
_	Go to line 3. Did your spouse, former spou	ise, or legal equivalent live	e with you at the time?	
in line 2 Form 1	2 again as a codebtor only if	f that person is a guaran	tor or cosigner. Make	if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Officia 16G). Use Schedule D, Schedule E/F, or Schedule G to fil
_	Column 1: Your codebtor			Column 2: The creditor to whom you owe the debt
Na	ame, Number, Street, City, State and Zli	P Code		Check all schedules that apply:
3.1				☐ Schedule D, line
N	ame			☐ Schedule E/F, line
				☐ Schedule G, line
	umber Street			_
С	ity	State	ZIP Code	
3.2				☐ Schedule D, line
	ame			Schedule E/F, line
				☐ Schedule G, line
N	umber Street			<u> </u>
	ity	State	ZIP Code	

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===	in this information to identify you					i			
	in this information to identify you btor 1								
	btor 2 Rhonda K	. Adams							
Uni	ited States Bankruptcy Court for t	he: NORTHERN DISTRIC	CT OF ILLINOIS						
	se number		-				nt sho	wing postpetition e following date:	chapter
0	fficial Form 106I					MM / DD/ Y		c following date.	
	chedule I: Your In	come				IVIIVI / DD/ T	111		12/15
sup spo atta	as complete and accurate as population. If you are separated and you have separated and you have separated between the separate sheet to this form	ou are married and not fili our spouse is not filing w n. On the top of any additi	ng jointly, and your ith you, do not inclu	spouse i ide infori	is liv mati	ing with you, inclu on about your spo	ıde inf use. If	ormation about more space is i	your needed,
1.	Fill in your employment information.		Debtor 1			Debtor 2	or noi	n-filing spouse	
	If you have more than one job,		☐ Employed			■ Emplo	yed		
	attach a separate page with information about additional	Employment status*	■ Not employed			☐ Not er	nploye	d	
	employers.	Occupation				Refund	Clerk		
	Include part-time, seasonal, or self-employed work.	Employer's name				Rockfor	d Mei	morial	
	Occupation may include studer or homemaker, if it applies.	t Employer's address				Attn: Ba 2400 N I Rockfor	Rockt		
		How long employed t		tachmen	t for	22 Additional Employ	2 yeaı /ment		
Pai	Give Details About N	onthly Income							
	mate monthly income as of the use unless you are separated.	date you file this form. If	you have nothing to r	eport for	any	line, write \$0 in the	space.	Include your nor	n-filing
	ou or your non-filing spouse have e space, attach a separate sheet		ombine the informatio	n for all e	empl	oyers for that persor	n on th	e lines below. If y	ou need
						For Debtor 1		Debtor 2 or -filing spouse	
2.	List monthly gross wages, sa deductions). If not paid monthly			2.	\$	0.00	\$	3,579.31	
3.	Estimate and list monthly over	ertime pay.		3.	+\$	0.00	+\$	0.00	
4.	Calculate gross Income. Add	line 2 + line 3.		4.	\$	0.00	\$	3,579.31	

Official Form 106I Schedule I: Your Income page 1

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	tor 1 tor 2	Dwayne A. Adams Rhonda K. Adams	-		Case r	number (<i>if l</i>	known)			
					For I	Debtor 1		or Debtor on-filing s		
	Сор	y line 4 here	4.		\$		0.00	\$,579.31	- -
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	58	а.	\$		0.00	\$	543.05	
	5b.	Mandatory contributions for retirement plans	5t	٥.	\$		0.00	\$	0.00	_
	5c.	Voluntary contributions for retirement plans	50	Э.	\$		0.00	\$	0.00	
	5d.	Required repayments of retirement fund loans	50		\$		0.00	\$ 	0.00	_
	5e.	Insurance	56		\$		0.00	\$	595.53	_
	5f.	Domestic support obligations	5f		\$		0.00	\$ 	0.00	_
	5g. 5h.	Union dues Other deductions. Specify:	5g	յ. Դ.+	\$		0.00	\$ 	0.00	
6			_		Ψ				0.00	_
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		ъ		0.00	\$,138.58	
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$		0.00	\$ 2	,440.73	_
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total								
	OI:	monthly net income.	88		\$		0.00	\$ 	0.00	_
	8b. 8c.	Interest and dividends Family support payments that you, a non-filing spouse, or a dependent	8b	ο.	\$		0.00	\$	0.00	_
	8d.	regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation	80 80		\$		0.00 0.00	\$ 	0.00	_
	8e.	Social Security	86		\$		0.00	\$	0.00	_
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	8f 8g		\$		0.00	\$	0.00	_
	8h.	Other monthly income. Specify: Second Employment	-	ง. า.+	· —		0.00		155.85	_
9.		all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	Г	\$		0.00	\$	155.8	_
4.0				_				 		
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_		0.00	- + \$	 2,596.58	= \$ _	2,596.58
11.	Stat Inclu	e all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your r friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a	dep			•		n Schedule	e <i>J</i> . +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies							\$	2,596.58
13.	Do y	ou expect an increase or decrease within the year after you file this form No.	?						Combi month	ned ly income
		Yes. Explain:								

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Debtor 1	Dwayne A. Adams		
Debtor 2	Rhonda K. Adams	Case number (if known)	

Official Form B 6I Attachment for Additional Employment Information

Spouse		
Occupation	Waitress	
Name of Employer	The Rathskeller & Sausage Shop	
How long employed		
Address of Employer	1132 Auburn Street	
	Rockford, IL 61103	

Official Form 106I Schedule I: Your Income page 3

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	n this informs	ition to identify yo	our caca:						
Debt	tor 1	Dwayne A. Adams			Check if this is: An amended filing				
	Debtor 2 Rhonda K. Adams					A supplement showing postpetition chapte 13 expenses as of the following date:			
``	ouse, if filing)						·	the following date.	
Unite	ed States Bankı	ruptcy Court for the	: NORTH	HERN DISTRICT OF ILLIN	OIS	<u> </u>	MM / DD / YYYY		
	e number nown)								
		orm 106J							
		J: Your						12/1	
info	rmation. If mater (if know		eded, atta ry questio	. If two married people ar ich another sheet to this n.					
1.	Is this a joir								
	□ No. Go to		•	ata bassa babilo					
		es Debtor 2 live i	n a separ	ate nousehold?					
	■ N □ Y	-	st file Offici	al Form 106J-2, Expenses	s for Separate Housel	hold of Debto	or 2.		
2.	Do you hav	e dependents?	□ No						
	Do not list D Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?	
	Do not state	the						□ No	
	dependents	names.			Daughter		10	Yes	
					Daughter		22	□ No ■ Yes	
								□ No	
					Daughter		22	■ Yes	
								□ No	
3.	expenses o	oenses include f people other t d your depende	han 👝	No Yes				☐ Yes	
exp	mate your ex	ate Your Ongoi openses as of your a date after the l	our bankrı	ly Expenses uptcy filing date unless y y is filed. If this is a supp	rou are using this fo plemental <i>Schedule</i>	rm as a sup J, check the	oplement in a Cha e box at the top o	pter 13 case to report f the form and fill in the	
the		h assistance an		government assistance i cluded it on <i>Schedule I:</i> \			Your exp	enses	
4.		or home owners		ses for your residence. I or lot.	nclude first mortgage	4. \$		1,138.00	
	If not includ	led in line 4:							
	4a. Real e	estate taxes				4a. \$		0.00	
	4b. Prope	rty, homeowner's				4b. \$		0.00	
		maintenance, re	•	upkeep expenses		4c. \$		0.00	

262.79

Additional mortgage payments for your residence, such as home equity loans

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Debtor '							
Debtor 2	Rhonda K. Adams	Case num	ber (if known)				
i. Uti	lities:						
6a		6a.	\$	240.00			
6b.	•	6b.		30.00			
6c.		6c.	\$	364.00			
6d.		6d.	\$	0.00			
	od and housekeeping supplies	7.	\$	300.00			
	ildcare and children's education costs	8.	\$	0.00			
_	othing, laundry, and dry cleaning	9.	\$	0.00			
	rsonal care products and services	10.	\$	20.00			
	dical and dental expenses	11.		0.00			
	Insportation. Include gas, maintenance, bus or train fare.		<u> </u>	0.00			
	not include car payments.	12.	\$	100.00			
	tertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00			
. Ch	aritable contributions and religious donations	14.	\$	0.00			
5. Ins	urance.						
Do	not include insurance deducted from your pay or included in lines 4 or 20.						
15	a. Life insurance	15a.	·	0.00			
15	o. Health insurance	15b.	\$	0.00			
15	c. Vehicle insurance	15c.	\$	138.00			
15	d. Other insurance. Specify:	15d.	\$	0.00			
6. Ta	kes. Do not include taxes deducted from your pay or included in lines 4 or 20.		·				
Sp	ecify:	16.	\$	0.00			
	tallment or lease payments:						
	a. Car payments for Vehicle 1	17a.	\$	0.00			
	o. Car payments for Vehicle 2	17b.	\$	0.00			
17	c. Other. Specify:	17c.	\$	0.00			
	d. Other. Specify:	17d.	\$	0.00			
3. Yo	ur payments of alimony, maintenance, and support that you did not report	as	•	0.00			
	ducted from your pay on line 5, Schedule I, Your Income (Official Form 106)). 18.	· ·				
	ner payments you make to support others who do not live with you.		\$	0.00			
	ecify:	19.					
	ner real property expenses not included in lines 4 or 5 of this form or on Sc	neauie i: Yo 20a.		0.00			
	a. Mortgages on other property b. Real estate taxes	20a. 20b.		0.00			
				0.00			
	c. Property, homeowner's, or renter's insurance	20c.	· -	0.00			
	d. Maintenance, repair, and upkeep expenses	20d.	·	0.00			
	e. Homeowner's association or condominium dues	20e.	·	0.00			
1. Ot	ner: Specify:	21.	+\$	0.00			
2. Ca	Iculate your monthly expenses						
	a. Add lines 4 through 21.		\$	2,592.79			
	o. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	2	\$				
	c. Add line 22a and 22b. The result is your monthly expenses.		\$	2,592.79			
22	2. Add and EEd and EED. The result to your monthly expenses.			2,332.13			
3. Ca	culate your monthly net income.						
23	a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	*	2,596.58			
23	c. Copy your monthly expenses from line 22c above.	23b.	-\$	2,592.79			
				<u> </u>			
23	c. Subtract your monthly expenses from your monthly income.	00	œ.	3.79			
	The result is your monthly net income.	23c.	\$	3.18			
For	Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a						
	dification to the terms of your mortgage?						
	No.						
	Yes. Explain here:						

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Fill in this infor	mation to identify your	rase:					
Debtor 1							
Deptor 1	Dwayne A. Adam First Name		st Name	-			
Debtor 2	Rhonda K. Adam	s					
(Spouse if, filing)	First Name		st Name	-			
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT OF ILLINO	DIS				
Case number							
(if known)				☐ Check if this is an			
				amended filing			
ou must file the	is form whenever you f	n connection with a bankruptcy cas	ed schedules. Making a false	statement, concealing property, or 50,000, or imprisonment for up to 20			
Sig	n Below						
Did you pa	ay or agree to pay some	one who is NOT an attorney to help	you fill out bankruptcy form	s?			
■ No							
☐ Yes.	Name of person		Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)				
	alty of perjury, I declare re true and correct.	that I have read the summary and s	schedules filed with this decla	aration and			
X /s/ Dw	ayne A. Adams	X	/s/ Rhonda K. Adams				
	ne A. Adams		Rhonda K. Adams				
Signatu	ire of Debtor 1		Signature of Debtor 2				
Date	August 22, 2017		Date August 22, 2017				

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Fill	in this inforn	nation to identify you	r case:				
	otor 1	Dwayne A. Adar					
		First Name	Middle Name	Last Name			
	otor 2 ouse if, filing)	Rhonda K. Adan	Niddle Name	Last Name			
		nkruptcy Court for the:	NORTHERN DISTRIC	T OF ILLINOIS			
		initiapitely Court for the.	NOITHERN BIOTHIO	I OI ILLIIVOIO			
	se number						heck if this is an mended filing
Of	ficial Fo	rm 107					
			Affairs for Indiv	iduals Filing	for Ba	nkruptcy	4/16
info	rmation. If m		attach a separate sheet			qually responsible for sup additional pages, write you	
Pai	t 1: Give D	etails About Your Ma	rital Status and Where Y	ou Lived Before			
1.	What is you	r current marital statu	ıs?				
	■ Married□ Not mar	ried					
2.	During the la	ast 3 years, have you	lived anywhere other that	ın where vou live no	w?		
	_	, , ,		,			
	■ No □ Yes. Lis	t all of the places you l	ived in the last 3 years. Do	not include where yo	u live now.		
	Debtor 1 Pr	ior Address:	Dates Debtor lived there	1 Debtor 2	Prior Addı	ress:	Dates Debtor 2 lived there
3. state						y property state or territory o, Texas, Washington and W	
	■ No □ Yes. Ma	ike sure you fill out <i>Scl</i>	nedule H: Your Codebtors	(Official Form 106H).			
	t O Funda		. I				
Pal	t 2 Explai	n the Sources of You	rincome				
4.	Fill in the total	al amount of income yo	nployment or from opera u received from all jobs an have income that you rece	d all businesses, inclu	ıding part-tir		ndar years?
	□ No						
	Yes. Fill	in the details.					
			Debtor 1			Debtor 2	
			Sources of income Check all that apply.	Gross income (before deduction exclusions)		Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	☐ Wages, commissions, bonuses, tips		\$0.00	■ Wages, commissions, bonuses, tips	\$26,968.11
			☐ Operating a business			☐ Operating a business	

Official Form 107

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Del	btor 2 RI	nonda K. Adams		Cas	e number (if known)		
			Debtor 1		Debtor 2		
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc		Gross income (before deductions and exclusions)
	For last calendar year: (January 1 to December 31, 2016)		■ Wages, commissions, bonuses, tips	\$6,874.00	■ Wages, combonuses, tips	imissions,	\$36,352.00
			☐ Operating a business		Operating a	business	
		dar year before that: December 31, 2015)	■ Wages, commissions, bonuses, tips	\$48,000.00	■ Wages, combonuses, tips	ımissions,	\$36,000.00
			☐ Operating a business		☐ Operating a	business	
	List each	, , ,	ase and you have income that yource separa	9	hat you listed in lir		
			Debtor 1 Sources of income	Gross income from	Debtor 2 Sources of inc	omo	Gross income
			Describe below.	Gross income from each source (before deductions and exclusions)	Describe below		(before deductions and exclusions)
Pai	rt 3: Lis	t Certain Pavments Yo	u Made Before You Filed for	Bankruptcv			
i-	□ No.	Neither Debtor 1 nor individual primarily for During the 90 days be No. Go to line Yes List below paid that continuous Subject to adjustme Debtor 1 or Debtor 2 During the 90 days be No. Go to line Yes List below include paid	reach creditor to whom you pai creditor. Do not include paymer e payments to an attorney for the nt on 4/01/19 and every 3 year or both have primarily consu fore you filed for bankruptcy, di	Imer debts. Consumer debtald purpose." d you pay any creditor a total d a total of \$6,425* or more the for domestic support oblighis bankruptcy case. Is after that for cases filed on timer debts. d you pay any creditor a total d a total of \$600 or more and	in one or more pay gations, such as ch or after the date of all of \$600 or more?	re? ments and the support a support	he total amount you ind alimony. Also, do
	Creditor	's Name and Address	Dates of payme	nt Total amount paid	Amount you still owe	Was this p	payment for
	Attn: B 1201 C	alley Federal Credit ankruptcy Dept. ifford Ave. Park, IL 61111	Union 6/2017 - 8/201		\$15,808.00	■ Mortgaç □ Car □ Credit C □ Loan Ro □ Supplie	Card

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Deb	tor 1 Dwayne A. Adams tor 2 Rhonda K. Adams	Doddinent	Cas	• se number (<i>if known</i>)		
	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pay	yment for
	Dubuque Bank PO Box 360 Dubuque, IA 52004	6/2017 - 8/2017	\$3,366.00	\$158,986.00	■ Mortgage □ Car □ Credit Cal □ Loan Rep □ Suppliers □ Other	ayment
	Within 1 year before you filed for bankruptout Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	ortners; relatives of any ger control, or owner of 20% of	neral partners; partners partners or more of their votin	erships of which yog g securities; and a	ou are a general ny managing ag	l partner; corporation gent, including one fo
	■ No □ Yes. List all payments to an insider.					
	Yes. List all payments to an insider. Insider's Name and Address	Dates of payment	Total amount	Amount you	Reason for t	his payment
	made 3 Hame and Address	bates of payment	paid	still owe	reason for t	ins payment
	Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cos No Yes, List all payments to an insider		ments or transfer a	any property on a	ccount of a de	bt that benefited a
	☐ Yes. List all payments to an insider Insider's Name and Address	Dates of payment	Total amount	Amount you	Reason for t	his payment
	moladi e name ana naaneee	Dates of paymont	paid	still owe	Include credi	
	Within 1 year before you filed for bankrupte List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. Case title Case number			on suits, paternity a		or custody
	Within 1 year before you filed for bankrupton Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address			foreclosed, garnis	shed, attached	, seized, or levied? Value of the property
	Within 90 days before you filed for bankrup accounts or refuse to make a payment bec No Yes. Fill in the details. Creditor Name and Address	otcy, did any creditor, inc	luding a bank or fi		n, set off any an	mounts from your Amoun
				taker		3 0 411
	Within 1 year before you filed for bankruptocourt-appointed receiver, a custodian, or a ■ No □ Yes		erty in the possess	ion of an assigne	e for the bene	fit of creditors, a

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	btor 1 Dwayne A. Adams btor 2 Rhonda K. Adams	Case number	(if known)	
Pa	rt 5: List Certain Gifts and Contributions			
13.	Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift.	etcy, did you give any gifts with a total value of more	than \$600 per person	?
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:			
14.	■ No	etcy, did you give any gifts or contributions with a tot	al value of more than	\$600 to any charity?
	Yes. Fill in the details for each gift or con Gifts or contributions to charities that tot more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		Dates you contributed	Value
Pa	rt 6: List Certain Losses			
15.	or gambling?	cy or since you filed for bankruptcy, did you lose any	thing because of the	it, fire, other disaster
	how the loss occurred	escribe any insurance coverage for the loss acclude the amount that insurance has paid. List pending surance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
	consulted about seeking bankruptcy or pre- Include any attorneys, bankruptcy petition pre	cy, did you or anyone else acting on your behalf pay eparing a bankruptcy petition? parers, or credit counseling agencies for services require		rty to anyone you
	Yes. Fill in the details. Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	001DebtorCC 378 Summit Ave. Jersey City, NJ 07306 www.debtorcc.org	\$14.95	8/2017	\$14.95
	Springer Law Firm 2222 E State St, Suite 107 Rockford, IL 61104	\$600.00	8/2017	\$600.00
17.		cy, did you or anyone else acting on your behalf pay ors or to make payments to your creditors? ou listed on line 16.	or transfer any prope	rty to anyone who
	■ No □ Yes. Fill in the details.			
	Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment

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Address Person's relationship to you Person's Fill in the details.	Deb	otor 2 Rhonda K. Adams			Case nu	mber (if known)	
Yes. Fill in the details. Person Who Received Transfer Address Person's relationship to you Person's relationship to		transferred in the ordinary course of your Include both outright transfers and transfers in include gifts and transfers that you have alread	business or financial aff made as security (such as	fairs? the granting of a			
Address Person's relationship to you Person's Fill in the details.		_					
19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details. Name of trust Description and value of the property transferred Date Transfer made Date account was closed, sold, who was person funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Storage Facility No Yes. Fill in the details. Name of Storage Facility Who else has or had access Describe the contents Do you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?					payn	nents received or debts	Date transfer was made
beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details. Name of trust Description and value of the property transferred Description and value of the property transferred Date Transfermade Description and value of the property transferred Date accounts or instruments held in your name, or for your benefit, cle sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brok houses, pension funds, cooperatives, associations, and other financial institutions. Name of Financial Institution and Address (Number, Street, City, State and ZIP Chase Bank 11440 Main Street Roscoe, IL 61073 AXXXX- Checking Savings Money Market Brokerage Other Other Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for secur cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Who else has or had access Describe the contents Do you st have it?		Person's relationship to you					
Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units		beneficiary? (These are often called asset-p		ny property to a	a self-settl	led trust or similar device	of which you are a
20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, cle sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, broke houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Who else had access to it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code) Who else has or had access Describe the contents Do you st have it? No Yes. Fill in the details. Name of Storage Facility No else has or had access Do you st have it?		Name of trust	Description and	value of the pro	operty trar	nsferred	Date Transfer was made
20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, cle sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, broke houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Who else had access to it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code) Who else has or had access Describe the contents Do you st have it? No Yes. Fill in the details. Name of Storage Facility No else has or had access Do you st have it?	Dow	4.9. List of Contain Financial Associate II	notrumento Sofo Dones	it Davas and C	torono I In	ita.	
sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brok houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) Code) Last 4 digits of account or instrument closed, sold, moved, or transferred Chase Bank XXXX- Checking Savings Checking Savings Money Market Brokerage Other Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for secur cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of Storage Facility No Yes. Fill in the details. Name of Storage Facility No Yes. Fill in the details. Name of Storage Facility No Yes. Fill in the details. Name of Storage Facility No Yes. Fill in the details. Name of Storage Facility No Yes. Fill in the details. Name of Storage Facility No Yes. Fill in the details. Name of Storage Facility No Yes. Fill in the details. Name of Storage Facility No Yes. Fill in the details. Name of Storage Facility No Who else has or had access Do you st have it?	Pan	List of Certain Financial Accounts, in	nstruments, Safe Depos	it Boxes, and S	torage Un	its	
Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) Last 4 digits of account number Instrument Inst		sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, asso	or other financial accou	unts; certificate	s of depos		
Address (Number, Street, City, State and ZIP account number instrument closed, sold, moved, or transferred Chase Bank		Yes. Fill in the details.					
11440 Main Street Roscoe, IL 61073 Savings Money Market Brokerage Other Other Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for secur cash, or other valuables? No		Address (Number, Street, City, State and ZIP	•	• •	ount or	closed, sold, moved, or	Last balance before closing or transfer
No ☐ Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No ☐ Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) Describe the contents have it? Do you st have it?		11440 Main Street	XXXX-	☐ Savings ☐ Money Ma ☐ Brokerage		8/2017	\$1.00
Address (Number, Street, City, State and ZIP Code)		cash, or other valuables?	l year before you filed fo	or bankruptcy, a	any safe de	eposit box or other depos	sitory for securities,
Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? ■ No □ Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Who else has or had access to it? Describe the contents have it?			Address (Number,		Describe	e the contents	Do you still have it?
☐ Yes. Fill in the details. Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Who else has or had access to it? Describe the contents have it?	22.	Have you stored property in a storage unit	,	r home within	1 year befo	ore you filed for bankrupt	cy?
Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Who else has or had access to it? Describe the contents have it?		_					
Address (Number, Street, City, State and ZIP Code) to it? have it?							
Address (Number, Street, City, State and ZIP Code)			to it? Address (Number,		Describe	e the contents	Do you still have it?

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Debtor 1 Dwayne A. Adams
Debtor 2 Rhonda K. Adams

Case number (if known)

Pai	t 9: Identify Property You Hold or Control for	Someone Else				
23.	Do you hold or control any property that some for someone.	one else owns? Include any prope	rty you borrowed from, are storing fo	or, or hold in trust		
	■ No					
	Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value		
Pai	t 10: Give Details About Environmental Inform	nation				
For	the purpose of Part 10, the following definitions	apply:				
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su	air, land, soil, surface water, groun	- ·			
_	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	-	law, whether you now own, operate,	or utilize it or used		
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or		s waste, hazardous substance, toxic	substance,		
Rep	ort all notices, releases, and proceedings that y	ou know about, regardless of whe	n they occurred.			
24.	Has any governmental unit notified you that yo	u may be liable or potentially liable	e under or in violation of an environn	nental law?		
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice		
25.	Have you notified any governmental unit of any	y release of hazardous material?				
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice		
26.	Have you been a party in any judicial or admini	strative proceeding under any env	ironmental law? Include settlements	and orders.		
	No Yes. Fill in the details.					
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case		
Pai	t 11: Give Details About Your Business or Cor	nnections to Any Business				
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have a	ny of the following connections to ar	ny business?		
	☐ A sole proprietor or self-employed in a	trade, profession, or other activity	, either full-time or part-time			
	☐ A member of a limited liability company	y (LLC) or limited liability partnersh	nip (LLP)			
	☐ A partner in a partnership	•	,			
	☐ An officer, director, or managing execu	itive of a corporation				
☐ An owner of at least 5% of the voting or equity securities of a corporation						

Case 17-81975 Doc 1 Filed 08/22/17 Entered 08/22/17 16:45:17 Page 43 of 54 Document Debtor 1 Dwayne A. Adams Rhonda K. Adams Debtor 2 Case number (if known) No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number Business Name Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. **Date Issued** Name Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Dwayne A. Adams /s/ Rhonda K. Adams Rhonda K. Adams Dwayne A. Adams Signature of Debtor 1 Signature of Debtor 2 Date August 22, 2017 Date August 22, 2017

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

■ No

☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

■ No

. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this inforr	mation to identify your	case:		
Debtor 1 Dwayne A. Adams				
	First Name	Middle Name	Last Name	
Debtor 2	Rhonda K. Adam	S		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's Dubuque Bank name:	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
Description of property securing debt: 9862 North 2nd Street Roscoe, IL 61073 Winnebago County	■ Retain the property and enter into a Reaffirmation Agreement.□ Retain the property and [explain]:	■ Yes
Creditor's Rock Valley Federal Credit Union name:	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
Description of property securing debt: 9862 North 2nd Street Roscoe, IL 61073 Winnebago County	■ Retain the property and enter into a Reaffirmation Agreement.□ Retain the property and [explain]:	■ Yes

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will the lease be assumed?

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Debtor 1 Debtor 2	Dwayne A. Adams Rhonda K. Adams		Case number (if known)	
Lessor's r				
	name. In of leased			□ No
Property:				☐ Yes
Lessor's r				□ No
Property:	n of leased			☐ Yes
Lessor's r				□ No
Property:	n of leased			☐ Yes
Lessor's r				□ No
Property:	n of leased			☐ Yes
Lessor's r				□ No
Property:	n of leased			☐ Yes
Lessor's r				□ No
Property:	n of leased			☐ Yes
Lessor's r				□ No
Property:	n of leased			☐ Yes
Part 3:	Sign Below			
	nalty of perjury, I declare hat is subject to an une	that I have indicated my intention about a	ny property of my estate that se	cures a debt and any personal
	owayne A. Adams		/ Rhonda K. Adams	
	yne A. Adams		honda K. Adams	
Sign	ature of Debtor 1	Si	gnature of Debtor 2	
Date	August 22, 2017	Date	August 22, 2017	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing tee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit
AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-81975 Doc 1 Filed 08/22/17 Entered 08/22/17 16:45:17 Desc Main Document Page 50 of 54

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In	Dwayne A. Adams re Rhonda K. Adams		Case No.				
	Monda IV. Adams	Debtor(s)	Chapter	7			
	DICCLOCUPE OF COMPEN	NCATION OF ATTOI	NEV EOD DI	EDTOD(S)			
	DISCLOSURE OF COMPEN	NSATION OF ATTOR	CNEY FOR DI	EBIOR(S)			
l.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(compensation paid to me within one year before the filin be rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy,	or agreed to be paid	to me, for services			
	For legal services, I have agreed to accept		\$	600.00			
	Prior to the filing of this statement I have received			600.00			
	Balance Due		\$	0.00			
2.	The source of the compensation paid to me was:						
	\blacksquare Debtor \square Other (specify):						
3.	The source of compensation to be paid to me is:						
	\blacksquare Debtor \square Other (specify):						
1.	■ I have not agreed to share the above-disclosed compo	ensation with any other person	unless they are mem	bers and associates	of my law firm.		
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name				y law firm. A		
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:						
	 a. Analysis of the debtor's financial situation, and rende b. Preparation and filing of any petition, schedules, state c. Representation of the debtor at the meeting of credito d. [Other provisions as needed] Negotiations with secured creditors to re 	ement of affairs and plan which ors and confirmation hearing, an	may be required; d any adjourned hea	rings thereof;			
	reaffirmation agreements and applicatio 522(f)(2)(A) for avoidance of liens on ho	ns as needed; preparation	and filing of mot	ons pursuant to	11 USC		
ó.	By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any dis any other adversary proceeding.			es, relief from st	ay actions or		
		CERTIFICATION					
this	I certify that the foregoing is a complete statement of any s bankruptcy proceeding.	y agreement or arrangement for	payment to me for r	epresentation of the	e debtor(s) in		
	August 22, 2017	/s/ Daniel A. Sprir					
	Date	Daniel A. Springe Signature of Attorne					
		Springer Law Fire					
		2222 É State St					
		Suite 107 Rockford, IL 6110	4				
		815.312.4725	· -				
		dspringerlaw@gr	nail.com				
		Name of law firm					

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Springer Law Firm

2222 East State St. # A-104A, Rockford, IL

815.312.4275

CHAPTER 7 RETAINER AGREEMENT

The undersigned agrees to hire Springer Law Firm to represent the undersigned in a Chapter 7 bankruptcy and agrees to the following terms and conditions:

- The attorney fees for the Chapter 7 bankruptcy are \$600. This is a flat fee arrangement, and does not
 include the court costs, which are currently \$335. This is the total of your attorney fees, and Springer Law
 Firm will not charge you for additional work. However, if you refuse to cooperate, or fail to provide
 information as requested by our attorney, your case may be closed.
- 2. Fees paid to the firm become property of the firm upon payment. If before the case is filed, you decide to close out your case, Springer Law Firm will refund you any fees not earned. I assign to Springer Law Firm any amount paid towards court costs and filing fees. I authorize Springer Law Firm to transfer said funds to the firm's operating account if I decide not to file for bankruptcy, or if I breach this contract.
- 3. I agree to disclose all pertinent information to Springer Law Firm, so that the firm can properly disclose all my assets, debts, and financial history to the court. I agree to keep the firm informed on any new assets or debts I may incur from this date forward. If I do not provide the proper information, or do not cooperate with Springer Law Firm, said firm may withdraw from representation, with permission of the court.
- 4. I understand that I may not be able to protect all of my property. The bankruptcy code does not provide exemptions for everything, and as such, some of my property may be taken by the Trustee and sold. Additionally, if my income is too high, or if my income is not offset enough by my expenses, I understand that the Trustee may dismiss my case, or require me to file a Chapter 13 instead of a Chapter 7.
- 5. I understand that not all of my debts may be discharged in a Chapter 7 bankruptcy. Student loans, educational debts, undisclosed debt, support/maintenance, fines, debts incurred by fraud, future association/condo HOA dues, certain tax debts, or debts found non-dischargeable by a Judge are among the debts not dischargeable.
- 6. I understand that this retainer agreement is for bankruptcy representation only. Springer Law Firm will not represent me in any other case or legal matter, unless agreed to in a separate retainer agreement.
- 7. I understand that before I transfer or sell any property, or incur any new debt, I will first notify Springer Law Firm and consult on the impact such action will have on my bankruptcy.
- 8. I understand that I must take 2 classes pertaining to financial management and credit counselling. Failure to take these courses will result in either my case NOT being filed, or if filed, possibly dismissed. If my case is dismissed, I understand that I will have to pay to have my case re-opened by Springer Law Firm.
- 9. I have received the 11 U.S.C. § 527(a) disclosures and have read them.

Dated: 8/23/2017	
Signature: Rhada adams	Attorney Signature: Attorney Print: Donel Spain
Signature DINTING Colum	

United States Bankruptcy Court Northern District of Illinois

In re	Dwayne A. Adams Rhonda K. Adams		Case No.		
		Debtor(s)	Chapter	7	
	VE	RIFICATION OF CREDITOR M	ATRIX		
		Number of Creditors: 1			
	The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.				
Date:	August 22, 2017	/s/ Dwayne A. Adams Dwayne A. Adams Signature of Debtor			
Date:	August 22, 2017	/s/ Rhonda K. Adams Rhonda K. Adams Signature of Debtor			

Bank of America Attn: Bankruptcy Dept. PO Box 982238 El Paso, TX 79998

Capital One Bank USA NA Attn: Bankruptcy Dept. PO Box 30281 Salt Lake City, UT 84130

Capital One/Menards PO Box 30253 Salt Lake City, UT 84130-0253

Chase Bank USA Attn: Bankruptcy Dept. PO Box 15298 Wilmington, DE 19850

Citicards CBNA Attn: Bankruptcy Dept. PO Box 6241 Sioux Falls, SD 57117

Discover Financial Services PO Box 15316 Wilmington, DE 19850

Dubuque Bank PO Box 360 Dubuque, IA 52004

Equifax PO Box 740256 Atlanta, GA 30374

Experian PO Box 4500 Allen, TX 75013

Nelnet Loan Services Attn: Bankruptcy Dept 3015 S Parker Rd Ste 425 Aurora, CO 80014 Rock Valley Federal Credit Union Attn: Bankruptcy Dept. 1201 Clifford Ave. Loves Park, IL 61111

SYNCB/Care Credit Attn: Bankruptcy Dept PO BOX 960061 Orlando, FL 32896

TD Bank USA/Target Credit Attn: Bankruptcy Dept. PO Box 673 Minneapolis, MN 55440

TransUnion 555 West Adams Street Chicago, IL 60661